

U.S. Individual Income Tax Return

2023

EXTENSION
OMB No. 1545-0074

GRANTED TO 10/15/24

IRS Use Only - Do not write or staple in this space.

For the year Jan. 1 - Dec. 31, 2023, or other tax year beginning		ending	See separate instructions.
Your first name and middle initial STEPHEN G.		Last name HILTON	Your social security number [REDACTED]
If joint return, spouse's first name and middle initial		Last name	Spouse's social security number [REDACTED]
Home address (number and street). If you have a P.O. box, see instructions. [REDACTED]		Apt. no.	Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. ☐ You ☐ Spouse
City, town, or post office. If you have a foreign address, also complete spaces below. [REDACTED]		State ZIP code [REDACTED]	
Foreign country name		Foreign province/state/county Foreign postal code	
Filing Status			
Check only one box.	☐ Single	☐ Head of household (HOH)	
	☐ Married filing jointly (even if only one had income)	☐ Qualifying surviving spouse (QSS)	
	☒ Married filing separately (MFS)		
If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent RACHEL M WHETSTONE			
Digital Assets	At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) ☐ Yes ☒ No		
Standard Deduction	Someone can claim: ☐ You as a dependent ☐ Your spouse as a dependent ☒ Spouse itemizes on a separate return or you were a dual-status alien		

Age/Blindness	You: ☐ Were born before January 2, 1959 ☐ Are blind	Spouse: ☐ Was born before January 2, 1959 ☐ Is blind
Dependents (see instructions):		
If more than four dependents, see instr. and check here ☐	(1) First name Last name	(2) Social security number (3) Relationship to you (4) Check the box if qualifies for (see instr.): Child tax credit Credit for other dependents

Income Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld. If you did not get a Form W-2, see instructions.	1a	Total amount from Form(s) W-2, box 1 (see instructions)	STMT 1	1a	3,101,220.
	b	Household employee wages not reported on Form(s) W-2		1b	
	c	Tip income not reported on line 1a (see instructions)		1c	
	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)		1d	
	e	Taxable dependent care benefits from Form 2441, line 26		1e	
	f	Employer-provided adoption benefits from Form 8839, line 29		1f	
	g	Wages from Form 8919, line 6		1g	
	h	Other earned income (see instructions)		1h	
	i	Nontaxable combat pay election (see instructions)	1i		
	z	Add lines 1a through 1h		1z	3,101,220.
	2a	Tax-exempt interest	2a		
	3a	Qualified dividends	3a		
	4a	IRA distributions	4a		
	5a	Pensions and annuities	5a		
	6a	Social security benefits	6a		
b	Taxable interest	2b		392.	
	Ordinary dividends	3b			
	Taxable amount	4b			
	Taxable amount	5b			
	Taxable amount	6b			
c	If you elect to use the lump-sum election method, check here (see instructions)				
7	Capital gain or (loss). Attach Schedule D if required. If not required, check here		7	-1,500.	
8	Additional income from Schedule 1, line 10		8	-141,994.	
9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income		9	2,958,118.	
10	Adjustments to income from Schedule 1, line 26		10		
11	Subtract line 10 from line 9. This is your adjusted gross income		11	2,958,118.	
12	Standard deduction or itemized deductions (from Schedule A)		12	5,005.	
13	Qualified business income deduction from Form 8995 or Form 8995-A		13		
14	Add lines 12 and 13		14	5,005.	
15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income		15	2,953,113.	

LHA For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form 1040 (2023)

Tax and Credits

16	Tax (see instructions). Check if any from Form(s): 1 ☐ 8814 2 ☐ 4972 3 ☐	16	1,057,609.
17	Amount from Schedule 2, line 3	17	
18	Add lines 16 and 17	18	1,057,609.
19	Child tax credit or credit for other dependents from Schedule 8812	19	
20	Amount from Schedule 3, line 8	20	
21	Add lines 19 and 20	21	
22	Subtract line 21 from line 18. If zero or less, enter -0-	22	1,057,609.
23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	3,462.
24	Add lines 22 and 23. This is your total tax	24	1,061,071.

Payments

25	Federal income tax withheld from:		
a	Form(s) W-2	25a	1,076,649.
b	Form(s) 1099	25b	
c	Other forms (see instructions) SEE STATEMENT 2	25c	2,787.
d	Add lines 25a through 25c	25d	1,079,436.
26	2023 estimated tax payments and amount applied from 2022 return	26	
27	Earned income credit (EIC)	27	
28	Additional child tax credit from Schedule 8812	28	
29	American opportunity credit from Form 8863, line 8	29	
30	Reserved for future use	30	
31	Amount from Schedule 3, line 15	31	
32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	
33	Add lines 25d, 26, and 32. These are your total payments	33	1,079,436.

If you have a qualifying child, attach Sch. EIC.

Refund

34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	18,365.
35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here ☐	35a	18,365.
b	Routing number	c	Type: ☒ Checking ☐ Savings
d	Account number		

Direct deposit? See instructions.

Amount You Owe

36	Amount of line 34 you want applied to your 2024 estimated tax	36	
37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
38	Estimated tax penalty (see instructions)	38	

Third Party Designee

Do you want to allow another person to discuss this return with the IRS? See instructions		☒ Yes. Complete below.	☐ No
Designee's name	Phone no.	Personal identification number (PIN)	
RAWLINSON & HUNTER LLP			

Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	
Your signature	Date
	TV NEWS SHOW HOST
Spouse's signature, if a joint return, both must sign.	Date
	Spouse's occupation
Phone no.	Email address

If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if: ☐ Self-employed
LISA FESTERLING	LISA FESTERLING	06/20/24		

Firm's name	Phone no.
RAWLINSON & HUNTER LLP	
Firm's address	Firm's EIN

Go to www.irs.gov/Form1040 for instructions and the latest information.

Form 1040 (2023)

SCHEDULE 1
(Form 1040)

Department of the Treasury
Internal Revenue Service

Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2023
Attachment
Sequence No. **01**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

STEPHEN G. HILTON

Your social security number

Part I Additional Income

	STMT 3	STMT 4		
1	Taxable refunds, credits, or offsets of state and local income taxes		1	0.
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions)			
3	Business income or (loss). Attach Schedule C		3	-141,994.
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E		5	0.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
a	Net operating loss		8a	()
b	Gambling		8b	
c	Cancellation of debt		8c	
d	Foreign earned income exclusion from Form 2555		8d	()
e	Income from Form 8853		8e	
f	Income from Form 8889		8f	
g	Alaska Permanent Fund dividends		8g	
h	Jury duty pay		8h	
i	Prizes and awards		8i	
j	Activity not engaged in for profit income		8j	
k	Stock options		8k	
l	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property		8l	
m	Olympic and Paralympic medals and USOC prize money (see instructions)		8m	
n	Section 951(a) inclusion (see instructions)		8n	
o	Section 951A(a) inclusion (see instructions)		8o	
p	Section 461(l) excess business loss adjustment		8p	
q	Taxable distributions from an ABLE account (see instructions)		8q	
r	Scholarship and fellowship grants not reported on Form W-2		8r	
s	Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d		8s	()
t	Pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan		8t	
u	Wages earned while incarcerated		8u	
z	Other income. List type and amount:		8z	
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8		10	-141,994.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2023

Part II Adjustments to Income

11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	12	
13	Health savings account deduction. Attach Form 8889	13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE	15	
16	Self-employed SEP, SIMPLE, and qualified plans	16	
17	Self-employed health insurance deduction	17	
18	Penalty on early withdrawal of savings	18	
19a	Alimony paid	19a	
b	Recipient's SSN		
c	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction	20	
21	Student loan interest deduction	21	
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
a	Jury duty pay (see instructions)	24a	
b	Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24b	
c	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	24c	
d	Reforestation amortization and expenses	24d	
e	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e	
f	Contributions to section 501(c)(18)(D) pension plans	24f	
g	Contributions by certain chaplains to section 403(b) plans	24g	
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h	
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i	
j	Housing deduction from Form 2555	24j	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k	
z	Other adjustments. List type and amount:	24z	
25	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10	26	

Schedule 1 (Form 1040) 2023

SCHEDULE 2
(Form 1040)

Department of the Treasury
Internal Revenue Service

Additional Taxes

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2023
Attachment
Sequence No. **02**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

STEPHEN G. HILTON

Your social security number

Part I Tax

1	Alternative minimum tax. Attach Form 6251	1	
2	Excess advance premium tax credit repayment. Attach Form 8962	2	
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17	3	0.

Part II Other Taxes

4	Self-employment tax. Attach Schedule SE	4	
5	Social security and Medicare tax on unreported tip income. Attach Form 4137	5	
6	Uncollected social security and Medicare tax on wages. Attach Form 8919	6	
7	Total additional social security and Medicare tax. Add lines 5 and 6	7	
8	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required If not required, check here ☐	8	
9	Household employment taxes. Attach Schedule H	9	
10	Repayment of first-time homebuyer credit. Attach Form 5405 if required	10	
11	Additional Medicare Tax. Attach Form 8959	11	3,462.
12	Net investment income tax. Attach Form 8960	12	
13	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12	13	
14	Interest on tax due on installment income from the sale of certain residential lots and timeshares	14	
15	Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000	15	
16	Recapture of low-income housing credit. Attach Form 8611	16	

(continued on page 2)

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 2 (Form 1040) 2023

Part II Other Taxes (continued)

17	Other additional taxes:			
a	Recapture of other credits. List type, form number, and amount			
		17a		
b	Recapture of federal mortgage subsidy, if you sold your home see instructions			
		17b		
c	Additional tax on HSA distributions. Attach Form 8889			
		17c		
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889			
		17d		
e	Additional tax on Archer MSA distributions. Attach Form 8853			
		17e		
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853			
		17f		
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property			
		17g		
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A			
		17h		
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A			
		17i		
j	Section 72(m)(5) excess benefits tax			
		17j		
k	Golden parachute payments			
		17k		
l	Tax on accumulation distribution of trusts			
		17l		
m	Excise tax on insider stock compensation from an expatriated corporation			
		17m		
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866			
		17n		
o	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR			
		17o		
p	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund			
		17p		
q	Any interest from Form 8621, line 24			
		17q		
z	Any other taxes. List type and amount:			
		17z		
18	Total additional taxes. Add lines 17a through 17z			18
19	Reserved for future use			19
20	Section 965 net tax liability installment from Form 965-A	20		
21	Add lines 4, 7 through 16, and 18. These are your total other taxes . Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b			21
				3,462.

Schedule 2 (Form 1040) 2023

SCHEDULE A
(Form 1040)

Department of the Treasury
Internal Revenue Service

Itemized Deductions

Attach to Form 1040 or 1040-SR.
Go to www.irs.gov/ScheduleA for instructions and the latest information.
Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

OMB No. 1545-0074

2023
Attachment
Sequence No. **07**

Name(s) shown on Form 1040 or 1040-SR

Your social security number

STEPHEN G. HILTON

**Medical
and
Dental
Expenses**

Caution: Do not include expenses reimbursed or paid by others.

1	Medical and dental expenses (see instructions)		1	
2	Enter amount from Form 1040 or 1040-SR, line 11	2	3	
3	Multiply line 2 by 7.5% (0.075)		3	
4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-		4	
5	State and local taxes.			
	a State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box ☐ SEE STATEMENT 5	5a	413,514.	
	b State and local real estate taxes (see instructions)	5b		
	c State and local personal property taxes	5c		
	d Add lines 5a through 5c	5d	413,514.	
	e Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing separately)	5e	5,000.	
6	Other taxes. List type and amount:	6		
7	Add lines 5e and 6	7		5,000.

**Interest You
Paid**

Caution: Your mortgage interest deduction may be limited. See instructions.

8	Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box ☐			
	a Home mortgage interest and points reported to you on Form 1098. See instructions if limited	8a		
	b Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address	8b		
	c Points not reported to you on Form 1098. See instructions for special rules	8c		
	d Reserved for future use	8d		
	e Add lines 8a through 8c	8e		
9	Investment interest. Attach Form 4952 if required. See instructions	9		
10	Add lines 8e and 9	10		

**Gifts to
Charity**

Caution: If you made a gift and got a benefit for it, see instructions.

11	Gifts by cash or check. If you made any gift of \$250 or more, see instructions	11	5.
12	Other than by cash or check. If you made any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500	12	
13	Carryover from prior year	13	
14	Add lines 11 through 13	14	5.

**Casualty and
Theft Losses**

15	Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions	15	
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**Other
Itemized
Deductions**

16	Other - from list in instructions. List type and amount:	16	
----	--	----	--

**Total
Itemized
Deductions**

17	Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040 or 1040-SR, line 12	17	5,005.
18	If you elect to itemize deductions even though they are less than your standard deduction, check this box ☐		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1040.

319501 11-03-23

Schedule A (Form 1040) 2023

SCHEDULE B
(Form 1040)

Department of the Treasury
Internal Revenue Service
Name(s) shown on return

Interest and Ordinary Dividends

Attach to Form 1040 or 1040-SR.
Go to www.irs.gov/ScheduleB for instructions and the latest information.

OMB No. 1545-0074

2023
Attachment
Sequence No. **08**

Your social security number

STEPHEN G. HILTON

Part I

Interest

- 1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address:

CITIBANK
C.HOARE & CO

Amount

32.
360.

Note: If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

- 2 Add the amounts on line 1
3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815
4 Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b

1

2

3

4

392.

392.

Note: If line 4 is over \$1,500, you must complete Part III.

Part II

Ordinary Dividends

- 5 List name of payer:

Amount

Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.

- 6 Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b

5

6

Note: If line 6 is over \$1,500, you must complete Part III.

Part III

Foreign Accounts and Trusts

Caution: If required, failure to file FinCEN Form 114 may result in substantial penalties. Additionally, you may be required to file Form 8938, Statement of Specified Foreign Financial Assets. See Instr. 327501 11-03-23

You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

- 7a At any time during 2023, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions
If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing requirements and exceptions to those requirements

- b If you are required to file FinCEN Form 114, list the name(s) of the foreign country(-ies) where the financial account(s) is (are) located UNITED KINGDOM

- 8 During 2023, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions

Yes No

X

X

X

LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule B (Form 1040) 2023

**SCHEDULE C
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Name of proprietor

Profit or Loss From Business

(Sole Proprietorship)

Attach to Form 1040, 1040-SR, 1040-SS, 1040-NR, or 1041; partnerships must generally file Form 1065.
Go to www.irs.gov/ScheduleC for instructions and the latest information.

OMB No. 1545-0074

2023
Attachment
Sequence No. 09

Social security number (SSN)

STEPHEN G. HILTON

A Principal business or profession, including product or service (see instructions)

MEDIA OUTLET

B Enter code from instructions

516000

C Business name. If no separate business name, leave blank.

CR PRODUCTIONS LLC

D Employer ID number (EIN) (see instr.)

E Business address (including suite or room no.)

City, town or post office, state, and ZIP code

CA

F Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify)

G Did you "materially participate" in the operation of this business during 2023? If "No," see instructions for limit on losses

☒ Yes ☐ No

H If you started or acquired this business during 2023, check here

I Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions

☐ Yes ☒ No

J If "Yes," did you or will you file required Form(s) 1099?

☐ Yes ☐ No

Part I Income

1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked	☐	1	3,439.
2 Returns and allowances		2	
3 Subtract line 2 from line 1		3	3,439.
4 Cost of goods sold (from line 42)		4	
5 Gross profit. Subtract line 4 from line 3		5	3,439.
6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)		6	
7 Gross income. Add lines 5 and 6		7	3,439.

Part II Expenses. Enter expenses for business use of your home only on line 30.

8 Advertising	8	101,433.	18 Office expense	18	
9 Car and truck expenses (see instructions)	9		19 Pension and profit-sharing plans	19	
10 Commissions and fees	10		20 Rent or lease (see instructions):		
11 Contract labor (see instructions)	11		a Vehicles, machinery, and equipment	20a	
12 Depreciation	12		b Other business property	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21 Repairs and maintenance	21	
14 Employee benefit programs (other than on line 19)	14		22 Supplies (not included in Part III)	22	
15 Insurance (other than health)	15		23 Taxes and licenses	23	
16 Interest (see instructions):			24 Travel and meals:		
a Mortgage (paid to banks, etc.)	16a		a Travel	24a	
b Other	16b		b Deductible meals (see instructions)	24b	
17 Legal and professional services	17		25 Utilities	25	
26 Total expenses before expenses for business use of home. Add lines 8 through 27b	26		26 Wages (less employment credits)	26	44,000.
29 Tentative profit or (loss). Subtract line 28 from line 7	29		27 a Other expenses (from line 48)	27a	
30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions.	30		b Energy efficient commercial bldgs deduction (attach Form 7205)	27b	
Simplified method filers only: Enter the total square footage of (a) your home: _____ and (b) the part of your home used for business: _____			28	28	145,433.
Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30			29	29	-141,994.
31 Net profit or (loss). Subtract line 30 from line 29.	31		30	30	
• If a profit, enter on both Schedule 1 (Form 1040) , line 3, and on Schedule SE , line 2. (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041 , line 3.			31	31	-141,994.
• If a loss, you must go to line 32.					
32 If you have a loss, check the box that describes your investment in this activity. See instructions.					
• If you checked 32a, enter the loss on both Schedule 1 (Form 1040) , line 3, and on Schedule SE , line 2. (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts, enter on Form 1041 , line 3.			32a	32a	☒ All investment is at risk.
• If you checked 32b, you must attach Form 6198 . Your loss may be limited.			32b	32b	☐ Some investment is not at risk.

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule C (Form 1040) 2023

15490626 147826 140870

15
2023.04000 HILTON, STEPHEN G

140870_1

SCHEDULE D

(Form 1040)

Department of the Treasury
Internal Revenue Service

Name(s) shown on return

Capital Gains and Losses

Attach to Form 1040, 1040-SR, or 1040-NR.
Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.
Go to www.irs.gov/ScheduleD for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment
Sequence No. **12**

Your social security number

STEPHEN G. HILTON

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? ☐ Yes ☒ No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions)

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824				4
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				5
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions				6 (193,500.)
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on page 2				7 <193,500.>

Part II Long-Term Capital Gains and Losses - Generally Assets Held More Than One Year (see instructions)

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824				11
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				12
13 Capital gain distributions. See the instructions				13
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions				14 ()
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III on page 2				15

LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule D (Form 1040) 2023

Part III Summary

16 Combine lines 7 and 15 and enter the result	16	<193,500.>
• If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22. • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.		
17 Are lines 15 and 16 both gains? ☐ Yes. Go to line 18. ☐ No. Skip lines 18 through 21, and go to line 22.		
18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet	18	
19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet	19	
20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. ☐ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.		
21 If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: • The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500) } SEE STATEMENT 6	21	(1,500.)
Note: When figuring which amount is smaller, treat both amounts as positive numbers.		
22 Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. ☒ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.		

Schedule D (Form 1040) 2023

SCHEDULE E
(Form 1040)

Department of the Treasury
Internal Revenue Service

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

Go to www.irs.gov/ScheduleE for instructions and the latest information.

OMB No. 1545-0074

2023
Attachment
Sequence No. **13**

Name(s) shown on return

Your social security number

STEPHEN G. HILTON

Part I **Income or Loss From Rental Real Estate and Royalties** Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

A Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions ☐ Yes ☒ No
B If "Yes," did you or will you file required Form(s) 1099? ☐ Yes ☐ No

1a Physical address of each property (street, city, state, ZIP code)

A 67A LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM

B 67B LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM

1b	Type of Property (from list below)	2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days			Personal Use Days			QJV
			A	B	C	A	B	C	
A	1		365						
B	1		365						
C									

Type of Property:

- 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental
2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe)

Income:

3 Rents received 3 6,530. 6,530.
4 Royalties received 4

Expenses:

5 Advertising 5
6 Auto and travel (see instructions) 6
7 Cleaning and maintenance 7
8 Commissions 8
9 Insurance 9 1,023. 280.
10 Legal and other professional fees 10
11 Management fees 11
12 Mortgage interest paid to banks, etc. (see instructions) 12
13 Other interest 13 3,683. 9,822.
14 Repairs 14 19,016. 19,016.
15 Supplies 15
16 Taxes 16
17 Utilities 17
18 Depreciation expense or depletion 18 9,155. 14,851.
19 Other (list) 19
20 Total expenses. Add lines 5 through 19 20 32,877. 43,969.
21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198 21 -26,347. -37,439.
22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 22 0. 0.

23a Total of all amounts reported on line 3 for all rental properties 23a 13,060.
b Total of all amounts reported on line 4 for all royalty properties 23b
c Total of all amounts reported on line 12 for all properties 23c
d Total of all amounts reported on line 18 for all properties 23d 24,006.
e Total of all amounts reported on line 20 for all properties 23e 76,846.

24 Income. Add positive amounts shown on line 21. Do not include any losses 24 0.
25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25
26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 26 0.

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2023

LHA 321491 11-07-23

Foreign Tax Credit
(Individual, Estate, or Trust)
Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.
Go to www.irs.gov/Form1116 for instructions and the latest information.

OMB No. 1545-0121

2023
Attachment
Sequence No. **19**

Name

Identifying number as shown on page 1 of your tax return

STEPHEN G. HILTON

Use a separate Form 1116 for each category of income listed below. See *Categories of Income* in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- a ☐ Section 951A category income c ☒ Passive category income e ☐ Section 901(j) income g ☐ Lump-sum distributions
b ☐ Foreign branch category income d ☐ General category income f ☐ Certain income re-sourced by treaty

Resident of (name of country) **UNITED STATES**

Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.

Part I Taxable Income or Loss From Sources Outside the United States (for category checked above)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
i Enter the name of the foreign country or U.S. possession UNITED KINGDOM				
1a Gross income from sources within country shown above and of the type checked above:	13,060.			13,060.
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source. See instructions ☐				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement) SEE STATEMENT 7	13,060.			
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction	5,000.			
b Other deductions (attach statement)				
c Add lines 3a and 3b	5,000.			
d Gross foreign source income	13,060.			
e Gross income from all sources	3,118,111.			
f Divide line 3d by line 3e	.004188433			
g Multiply line 3c by line 3f	21.			
4 Pro rata share of interest expense:				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	13,081.			
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				-21.

Part II Foreign Taxes Paid or Accrued

Country	Credit is claimed for taxes (you must check one) (j) ☒ Paid (k) ☐ Accrued	Foreign taxes paid or accrued							(u) Total foreign taxes paid or accrued (add cols. (q) through (t))	
		In foreign currency			(p) Other foreign taxes paid or accrued	In U.S. dollars				
		Taxes withheld at source on:				Taxes withheld at source on:				(t) Other foreign taxes paid or accrued
		(l) Date paid or accrued	(m) Dividends	(n) Rents and royalties		(o) Interest	(q) Dividends	(r) Rents and royalties		
A										
B										
C										

8 Add lines A through C, column (u). Enter the total here and on line 9, page 2

For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2023)

Part III Figuring the Credit

9 Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9		
10 Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year. If you enter an amount on line 10 and you don't need to attach Schedule B, check here (see instructions) ☐ (If your income was section 951A category income (box a above Part I), leave line 10 blank.)	10		
11 Add lines 9 and 10	11		
12 Reduction in foreign taxes	12		
13 Taxes reclassified under high tax kickout	13		
14 Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14		
15 Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I	15	-21.	
16 Adjustments to line 15	16	21.	
17 Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.)	17		
18 Individuals: Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. Estates and trusts: Enter your taxable income without the deduction for your exemption Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.	18		
19 Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19		
20 Individuals: Enter the total of Form 1040, 1040-SR or 1040-NR, line 16, and Schedule 2 (Form 1040), line 2. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, Part II, lines 2, 3, 4, and 6. Foreign estates and trusts should enter the amount from Form 1040-NR, line 16. See instructions Caution: If you are completing line 20 for separate category g (lump-sum distributions), or, if you file Form 9978, Partner's Additional Reporting Year Tax, see instructions.	20		
21 Multiply line 20 by line 19 (maximum amount of credit)	21		
22 Increase in limitation (section 960(c)) (see instructions)	22		
23 Add lines 21 and 22	23		
24 Enter the smaller of line 14 or line 23. If this is the only Form 1116 you are filing, skip lines 25 through 32 and enter this amount on line 33. Otherwise, complete the appropriate line in Part IV	24		

Part IV Summary of Credits From Separate Parts III

25 Credit for taxes on section 951A category income	25		
26 Credit for taxes on foreign branch category income	26		
27 Credit for taxes on passive category income	27		
28 Credit for taxes on general category income	28		
29 Credit for taxes on section 901(j) income	29		
30 Credit for taxes on certain income re-sourced by treaty	30		
31 Credit for taxes on lump-sum distributions	31		
32 Add lines 25 through 31	32		
33 Enter the smaller of line 20 or line 32	33	0.	
34 Reduction of credit for international boycott operations	34		
35 Subtract line 34 from line 33. This is your foreign tax credit . Enter here and on Schedule 3 (Form 1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, line 1a	35	0.	

Form 1116 (2023)

Form

1116Department of the Treasury
Internal Revenue Service**ALTERNATIVE MINIMUM TAX
Foreign Tax Credit**

(Individual, Estate, or Trust)

Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.
Go to www.irs.gov/Form1116 for instructions and the latest information.

OMB No. 1545-0121

2023Attachment
Sequence No. **19**

Name

Identifying number as shown on page 1 of your tax return

STEPHEN G. HILTONUse a separate Form 1116 for each category of income listed below. See *Categories of Income* in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- a ☐ Section 951A category income c ☒ Passive category income e ☐ Section 901(j) income g ☐ Lump-sum distributions
 b ☐ Foreign branch category income d ☐ General category income f ☐ Certain income re-sourced by treaty

h Resident of (name of country) **UNITED STATES****Note:** If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.**Part I Taxable Income or Loss From Sources Outside the United States** (for category checked above)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
i Enter the name of the foreign country or U.S. possession UNITED KINGDOM				
1a Gross income from sources within country shown above and of the type checked above:	13,060.			13,060.
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source. See instructions ☐				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)	13,060.			
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction				
b Other deductions (attach statement)				
c Add lines 3a and 3b				
d Gross foreign source income	13,060.			
e Gross income from all sources	3,118,111.			
f Divide line 3d by line 3e	.004188433			
g Multiply line 3c by line 3f				
4 Pro rata share of interest expense:				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	13,060.			
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				13,060.

Part II Foreign Taxes Paid or Accrued

Country	Credit is claimed for taxes (you must check one) (j) ☒ Paid (k) ☐ Accrued	Foreign taxes paid or accrued						(u) Total foreign taxes paid or accrued (add cols. (q) through (t))		
		In foreign currency				In U.S. dollars				
		Taxes withheld at source on:				Taxes withheld at source on:			(t) Other foreign taxes paid or accrued	
		(l) Date paid or accrued	(m) Dividends	(n) Rents and royalties	(o) Interest	(p) Other foreign taxes paid or accrued	(q) Dividends	(r) Rents and royalties	(s) Interest	
A										
B										
C										

8 Add lines A through C, column (u). Enter the total here and on line 9, page 2

For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2023)

LHA 311501 12-21-23

15490626 147826 140870

21
2023.04000 HILTON, STEPHEN G

140870_1

ALTERNATIVE MINIMUM TAX

Form 1116 (2023) **STEPHEN G. HILTON**

Page **2**

Part III Figuring the Credit

9 Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9		
10 Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year. If you enter an amount on line 10 and you don't need to attach Schedule B, check here (see instructions) ☐ (If your income was section 951A category income (box a above Part I), leave line 10 blank.)	10		
11 Add lines 9 and 10	11		
12 Reduction in foreign taxes	12		
13 Taxes reclassified under high tax kickout	13		
14 Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14		
15 Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I	15		
16 Adjustments to line 15	16		
17 Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.)	17		
18 Individuals: Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. Estates and trusts: Enter your taxable income without the deduction for your exemption Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.	18		
19 Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19		
20 Individuals: Enter the total of Form 1040, 1040-SR or 1040-NR, line 16, and Schedule 2 (Form 1040), line 2. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, Part II, lines 2, 3, 4, and 6. Foreign estates and trusts should enter the amount from Form 1040-NR, line 16. See instructions Caution: If you are completing line 20 for separate category g (lump-sum distributions), or, if you file Form 8978, Partner's Additional Reporting Year Tax, see instructions.	20		
21 Multiply line 20 by line 19 (maximum amount of credit)	21		
22 Increase in limitation (section 960(c)) (see instructions)	22		
23 Add lines 21 and 22	23		
24 Enter the smaller of line 14 or line 23. If this is the only Form 1116 you are filing, skip lines 25 through 32 and enter this amount on line 33. Otherwise, complete the appropriate line in Part IV	24		

Part IV Summary of Credits From Separate Parts III

25 Credit for taxes on section 951A category income	25	
26 Credit for taxes on foreign branch category income	26	
27 Credit for taxes on passive category income	27	
28 Credit for taxes on general category income	28	
29 Credit for taxes on section 901(j) income	29	
30 Credit for taxes on certain income re-sourced by treaty	30	
31 Credit for taxes on lump-sum distributions	31	
32 Add lines 25 through 31	32	
33 Enter the smaller of line 20 or line 32	33	0.
34 Reduction of credit for international boycott operations	34	
35 Subtract line 34 from line 33. This is your foreign tax credit . Enter here and on Schedule 3 (Form 1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, line 1a	35	0.

Form **1116** (2023)

**Allocation of Tax Amounts Between
Certain Individuals in Community Property States**

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/Form8958 for the latest information.

OMB No. 1545-0074

Attachment
Sequence No. **63**

Your first name and initial STEPHEN G.		Your last name HILTON		Your social security number (SSN) [REDACTED]	
Spouse's or partner's first name and initial RACHEL M.		Spouse's or partner's last name WHETSTONE		Spouse's or partner's SSN [REDACTED]	
	A Total Amount	B Allocated to Spouse or RDP SSN [REDACTED]	C Allocated to Spouse or RDP SSN [REDACTED]		
1 Wages (each employer) FOX NEWS NETWORK LLC	509,615.	254,808.	254,807.		
NETFLIX, INC.	5,692,825.	2,846,413.	2,846,412.		
2 Interest Income (each payer) BANK INTEREST	784.	392.	392.		
3 Dividends (each payer)					
4 State income tax refund					
5 Self-employment income (see instructions) CR PRODUCTIONS	-283,988.	-141,994.	-141,994.		
6 Capital gains and losses ST CAPITAL LOSS CARRYOVER	-193,500.	-193,500.			
DISALLOWED CAPITAL LOSSES	192,000.	192,000.			
7 Pension income					
8 Rents, royalties, partnerships, estates, trusts					

	A Total Amount	B Allocated to Spouse or RDP	C Allocated to Spouse or RDP
		SSN [REDACTED]	SSN [REDACTED]
9 Deductible part of self-employment tax (see instructions)			
10 Self-employment tax (see instructions)			
11 Taxes withheld			
FOX NEWS NETWORK LLC	122,514.	61,257.	61,257.
NETFLIX, INC.	2,030,783.	1,015,392.	1,015,391.
12 Other items such as: social security benefits, unemployment compensation, deductions, credits, etc.			
ITEMIZED DEDUCTION	5,005.	5,005.	
OTHER TAXES	3,462.	3,462.	

Form 8958 (11-2023)

Form

8959Department of the Treasury
Internal Revenue Service**Additional Medicare Tax**

If any line does not apply to you, leave it blank. See separate instructions.
 Attach to Form 1040, 1040-SR, 1040-NR, or 1040-SS.
 Go to www.irs.gov/Form8959 for instructions and the latest information.

OMB No. 1545-0074

2023Attachment
Sequence No. 71

Name(s) shown on return

STEPHEN G. HILTON

Your social security number

Part I Additional Medicare Tax on Medicare Wages

1	Medicare wages and tips from Form W-2, box 5. If you have more than one Form W-2, enter the total of the amounts from box 5	1	509,615.	
2	Unreported tips from Form 4137, line 6	2		
3	Wages from Form 8919, line 6	3		
4	Add lines 1 through 3	4	509,615.	
5	Enter the following amount for your filing status: Married filing jointly \$250,000 Married filing separately \$125,000 Single, Head of household, or Qualifying surviving spouse \$200,000	5	125,000.	
6	Subtract line 5 from line 4. If zero or less, enter -0-	6		384,615.
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to Part II	7		3,462.

Part II Additional Medicare Tax on Self-Employment Income

8	Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0-	8		
9	Enter the following amount for your filing status: Married filing jointly \$250,000 Married filing separately \$125,000 Single, Head of household, or Qualifying surviving spouse \$200,000	9		
10	Enter the amount from line 4	10		
11	Subtract line 10 from line 9. If zero or less, enter -0-	11		
12	Subtract line 11 from line 8. If zero or less, enter -0-	12		
13	Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and go to Part III	13		

Part III Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) Compensation

14	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14 (see instructions)	14		
15	Enter the following amount for your filing status: Married filing jointly \$250,000 Married filing separately \$125,000 Single, Head of household, or Qualifying surviving spouse \$200,000	15		
16	Subtract line 15 from line 14. If zero or less, enter -0-	16		
17	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9% (0.009). Enter here and go to Part IV	17		

Part IV Total Additional Medicare Tax

18	Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 11 (Form 1040-SS filers, see instructions), and go to Part V	18		3,462.
----	--	----	--	--------

Part V Withholding Reconciliation

19	Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts from box 6	19	10,176.	
20	Enter the amount from line 1	20	509,615.	
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax withholding on Medicare wages	21	7,389.	
22	Subtract line 21 from line 19. If zero or less, enter -0-. This is your Additional Medicare Tax withholding on Medicare wages	22		2,787.
23	Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box 14 (see instructions)	23		
24	Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount with federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c (Form 1040-SS filers, see instructions)	24		2,787.

323111 12-07-23 LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8959 (2023)

25

15490626 147826 140870

2023.04000 HILTON, STEPHEN G

140870_1

Form

8960**Net Investment Income Tax -
Individuals, Estates, and Trusts**

OMB No. 1545-2227

2023Attachment
Sequence No. 72Department of the Treasury
Internal Revenue Service

Attach to your tax return.

Go to www.irs.gov/Form8960 for instructions and the latest information.

Name(s) shown on your tax return

STEPHEN G. HILTON

Your social security number or EIN

Part I Investment Income

- ☐ Section 6013(g) election (see instructions)
☐ Section 6013(h) election (see instructions)
☐ Regulations section 1.1411-10(g) election (see instructions)

1	Taxable interest (see instructions)		1	392.
2	Ordinary dividends (see instructions)		2	
3	Annuities (see instructions)		3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, trades or businesses, etc. (see instructions)	4a	-141,994.	
b	Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions) STATEMENT 8	4b	141,994.	
c	Combine lines 4a and 4b		4c	0.
5a	Net gain or loss from disposition of property (see instructions)	5a	-1,500.	
b	Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)	5b		
c	Adjustment from disposition of partnership interest or S corporation stock (see instructions)	5c		
d	Combine lines 5a through 5c		5d	-1,500.
6	Adjustments to investment income for certain CFCs and PFICs (see instructions)		6	
7	Other modifications to investment income (see instructions)		7	
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7		8	-1,108.

Part II Investment Expenses Allocable to Investment Income and Modifications

9a	Investment interest expenses (see instructions)	9a		
b	State, local, and foreign income tax (see instructions)	9b		
c	Miscellaneous investment expenses (see instructions)	9c		
d	Add lines 9a, 9b, and 9c		9d	
10	Additional modifications (see instructions)		10	
11	Total deductions and modifications. Add lines 9d and 10		11	

Part III Tax Computation

12	Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, complete lines 13-17. Estates and trusts, complete lines 18a - 21. If zero or less, enter -0-		12	
13	Modified adjusted gross income (see instructions)	13	2,958,118.	
14	Threshold based on filing status (see instructions)	14	125,000.	
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	2,833,118.	
16	Enter the smaller of line 12 or line 15		16	
17	Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). Enter here and include on your tax return (see instructions)		17	
18a	Net investment income (line 12 above)	18a		
b	Deductions for distributions of net investment income and charitable deductions (see instructions)	18b		
c	Undistributed net investment income. Subtract line 18b from line 18a (see instructions). If zero or less, enter -0-	18c		
19a	Adjusted gross income (see instructions)	19a		
b	Highest tax bracket for estates and trusts for the year (see instructions)	19b		
c	Subtract line 19b from line 19a. If zero or less, enter -0-	19c		
20	Enter the smaller of line 18c or line 19c		20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.038). Enter here and include on your tax return (see instructions)		21	

LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8960 (2023)

323121 12-08-23

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15490626 147826 140870

2023.04000 HILTON, STEPHEN G

140870_1

Form 8582 (2023) **STEPHEN G. HILTON**

Form 8582 (2023)

STEPHEN G. HILTON

Page 2

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 2a)	(b) Net loss (line 2b)	(c) Unallowed loss (line 2c)	(d) Gain	(e) Loss
SEE ATTACHED STATEMENT FOR PART V					
Total. Enter on Part I, lines 2a, 2b, and 2c		-63,786.	-149,664.		

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
Total					

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
SEE ATTACHED STATEMENT FOR PART VII				
Total		213,450.	1.000000000	213,450.

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
	SEE ATTACHED	STATEMENT FOR PART VIII		
Total		213,450.	213,450.	

Form 8582 (2023)

Form **8829**Department of the Treasury
Internal Revenue Service**Expenses for Business Use of Your Home**

File only with Schedule C (Form 1040). Use a separate Form 8829 for each home you used for business during the year.

Go to www.irs.gov/Form8829 for instructions and the latest information.

OMB No. 1545-0074

2023Attachment
Sequence No. 176

Name(s) of proprietor(s)

STEPHEN G. HILTON

Your social security number

Part I **Part of Your Home Used for Business**

1	Area used regularly and exclusively for business, regularly for daycare, or for storage of inventory or product samples (see instructions)	1	
2	Total area of home	2	
3	Divide line 1 by line 2. Enter the result as a percentage	3	%
For daycare facilities not used exclusively for business, go to line 4. All others, go to line 7.			
4	Multiply days used for daycare during year by hours used per day	4	hr.
5	If you started or stopped using your home for daycare during the year, see instructions; otherwise, enter 8,760	5	hr.
6	Divide line 4 by line 5. Enter the result as a decimal amount	6	
7	Business percentage. For daycare facilities not used exclusively for business, multiply line 6 by line 3 (enter the result as a percentage). All others, enter the amount from line 3	7	%

Part II **Figure Your Allowable Deduction**

8	Enter the amount from Schedule C, line 29, plus any gain derived from the business use of your home, minus any loss from the trade or business not derived from the business use of your home. See instructions.	8	-141,994.
See instructions for columns (a) and (b) before completing lines 9-22.			
9	Casualty losses (see instructions)	(a) Direct expenses	(b) Indirect expenses
10	Deductible mortgage interest (see instructions)	10	
11	Real estate taxes (see instructions)	11	
12	Add lines 9, 10, and 11	12	
13	Multiply line 12, column (b), by line 7	13	
14	Add line 12, column (a), and line 13	14	
15	Subtract line 14 from line 8. If zero or less, enter -0-	15	0.
16	Excess mortgage interest (see instructions)	16	
17	Excess real estate taxes (see instructions)	17	
18	Insurance	18	
19	Rent	19	
20	Repairs and maintenance	20	
21	Utilities	21	
22	Other expenses (see instructions)	22	
23	Add lines 16 through 22	23	
24	Multiply line 23, column (b), by line 7	24	
25	Carryover of prior year operating expenses (see instructions)	25	
26	Add line 23, column (a), line 24, and line 25	26	
27	Allowable operating expenses. Enter the smaller of line 15 or line 26	27	
28	Limit on excess casualty losses and depreciation. Subtract line 27 from line 15	28	0.
29	Excess casualty losses (see instructions)	29	
30	Depreciation of your home from line 42 below	30	
31	Carryover of prior year excess casualty losses and depreciation (see instructions)	31	
32	Add lines 29 through 31	32	
33	Allowable excess casualty losses and depreciation. Enter the smaller of line 28 or line 32	33	0.
34	Add lines 14, 27, and 33	34	0.
35	Casualty loss portion, if any, from lines 14 and 33. Carry amount to Form 4684 . See instructions	35	0.
36	Allowable expenses for business use of your home. Subtract line 35 from line 34. Enter here and on Schedule C, line 30. If your home was used for more than one business, see instructions	36	0.

Part III **Depreciation of Your Home**

37	Enter the smaller of your home's adjusted basis or its fair market value. See instructions	37	
38	Value of land included on line 37	38	
39	Basis of building. Subtract line 38 from line 37	39	
40	Business basis of building. Multiply line 39 by line 7	40	
41	Depreciation percentage (see instructions)	41	%
42	Depreciation allowable (see instructions). Multiply line 40 by line 41. Enter here and on line 30 above	42	

Part IV **Carryover of Unallowed Expenses to 2024**

43	Operating expenses. Subtract line 27 from line 26. If less than zero, enter -0-	43	
44	Excess casualty losses and depreciation. Subtract line 33 from line 32. If less than zero, enter -0-	44	

LHA For Paperwork Reduction Act Notice, see your tax return instructions.

320301 10-20-23

Form **8829** (2023)

Form **4562**Department of the Treasury
Internal Revenue Service
Name(s) shown on return**Depreciation and Amortization**
(Including Information on Listed Property)Attach to your tax return. **SCHEDULE E- 1**Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2023Attachment
Sequence No. **179****STEPHEN G. HILTON**

Business or activity to which this form relates

**RESIDENTIAL - 67A
LEVERTON STREET, LONDON**

Identifying number

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2022 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	9,155.

Part III MACRS Depreciation (Don't include listed property. See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2023	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B - Assets Placed in Service During 2023 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year	/		30 yrs.	MM	S/L	
d 40-year	/		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	9,155.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No **24b** If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
--	-------------------------------------	--	-------------------------------	--	---------------------------	------------------------------	----------------------------------	---------------------------------------

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use

25

26 Property used more than 50% in a qualified business use:

	:	:	%					
	:	:	%					
	:	:	%					

27 Property used 50% or less in a qualified business use:

	:	:	%			S/L -		
	:	:	%			S/L -		
	:	:	%			S/L -		

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1

28

29 Add amounts in column (i), line 26. Enter here and on line 7, page 1

29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1	(b) Vehicle 2	(c) Vehicle 3	(d) Vehicle 4	(e) Vehicle 5	(f) Vehicle 6
30 Total business/investment miles driven during the year (don't include commuting miles)						
31 Total commuting miles driven during the year						
32 Total other personal (noncommuting) miles driven						
33 Total miles driven during the year. Add lines 30 through 32						
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?						
36 Is another vehicle available for personal use?						

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
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42 Amortization of costs that begins during your 2023 tax year:

	:	:			
	:	:			

43 Amortization of costs that began before your 2023 tax year

43

44 Total. Add amounts in column (f). See the instructions for where to report

44

Form **4562**Department of the Treasury
Internal Revenue Service
Name(s) shown on return**Depreciation and Amortization**
(Including Information on Listed Property)Attach to your tax return. **SCHEDULE E- 2**Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2023Attachment
Sequence No. **179****STEPHEN G. HILTON**

Business or activity to which this form relates

**RESIDENTIAL - 67B
LEVERTON STREET, LONDON**

Identifying number

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2022 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	14,851.

Part III MACRS Depreciation (Don't include listed property. See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2023	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B - Assets Placed in Service During 2023 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year	/		30 yrs.	MM	S/L	
d 40-year	/		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	14,851.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.**Section A - Depreciation and Other Information** (Caution: See the instructions for limits for passenger automobiles.)**24a** Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No **24b** If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
--	-------------------------------------	--	-------------------------------	--	---------------------------	------------------------------	----------------------------------	---------------------------------------

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use**25****26** Property used more than 50% in a qualified business use:

		%						
		%						
		%						

27 Property used 50% or less in a qualified business use:

		%				S/L -		
		%				S/L -		
		%				S/L -		

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1**28****29** Add amounts in column (i), line 26. Enter here and on line 7, page 1**29****Section B - Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1	(b) Vehicle 2	(c) Vehicle 3	(d) Vehicle 4	(e) Vehicle 5	(f) Vehicle 6
30 Total business/investment miles driven during the year (don't include commuting miles)						
31 Total commuting miles driven during the year						
32 Total other personal (noncommuting) miles driven						
33 Total miles driven during the year. Add lines 30 through 32						
34 Was the vehicle available for personal use during off-duty hours?	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
35 Was the vehicle used primarily by a more than 5% owner or related person?						
36 Is another vehicle available for personal use?						

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2023 tax year:					
43 Amortization of costs that began before your 2023 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report					44

Statement of Specified Foreign Financial Assets

► Go to www.irs.gov/Form8938 for instructions and the latest information.

► Attach to your tax return.

OMB No. 1545-2195

Attachment
Sequence No. **938**

For calendar year **2023** or tax year beginning _____ and ending _____

If you have attached additional statements, check here ☐

Number of additional statements _____

1 Name(s) shown on return

STEPHEN G. HILTON

2 Taxpayer identification number (TIN)

3 Type of filer

a ☒ Specified individual b ☐ Partnership c ☐ Corporation d ☐ Trust

4 If you checked box 3a, skip this line 4. If you checked box 3b or 3c, enter the name and TIN of the specified individual who closely holds the partnership or corporation. If you checked box 3d, enter the name and TIN of the specified person who is a current beneficiary of the trust. (See instructions for definitions and what to do if you have more than one specified individual or specified person to list.)

a Name

b TIN

Part I Foreign Deposit and Custodial Accounts Summary

5 Number of deposit accounts (reported in Part V) **1**
6 Maximum value of all deposit accounts \$ **160,465.**
7 Number of custodial accounts (reported in Part V) **1**
8 Maximum value of all custodial accounts \$ **160,465.**
9 Were any foreign deposit or custodial accounts closed during the tax year? ☐ Yes ☒ No

Part II Other Foreign Assets Summary

10 Number of foreign assets (reported in Part VI) **1**
11 Maximum value of all assets (reported in Part VI) \$ **711,188.**
12 Were any foreign assets acquired or sold during the tax year? ☐ Yes ☒ No

Part III Summary of Tax Items Attributable to Specified Foreign Financial Assets (see instructions)

(a) Asset category	(b) Tax item	(c) Amount reported on form or schedule	Where reported	
			(d) Form and line	(e) Schedule and line
13 Foreign deposit and custodial accounts	a Interest	\$ 360.		SCH B, LN 1
	b Dividends	\$		
	c Royalties	\$		
	d Other income	\$		
	e Gains (losses)	\$		
	f Deductions	\$		
	g Credits	\$		
14 Other foreign assets	a Interest	\$		
	b Dividends	\$		
	c Royalties	\$		
	d Other income	\$		
	e Gains (losses)	\$		
	f Deductions	\$		
	g Credits	\$		

Part IV Excepted Specified Foreign Financial Assets (see instructions)

If you reported specified foreign financial assets on one or more of the following forms, enter the number of such forms filed. You do not need to include these assets on Form 8938 for the tax year.

15 Number of Forms 3520 _____ 16 Number of Forms 3520-A _____ 17 Number of Forms 5471 _____
18 Number of Forms 8621 _____ 19 Number of Forms 8865 _____

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **8938** (Rev. 11-2021)

Part V Detailed Information for Each Foreign Deposit and Custodial Account Included in the Part I Summary
(see instructions)

If you have more than one account to report in Part V, attach a separate statement for each additional account. See instructions.

20 Type of account	a ☒ Deposit	21 Account number or other designation
	b ☐ Custodial	
22 Check all that apply	a ☐ Account opened during tax year	b ☐ Account closed during tax year
	c ☒ Account jointly owned with spouse	d ☒ No tax item reported in Part III with respect to this asset
23 Maximum value of account during tax year	\$ 160,465.	
24 Did you use a foreign currency exchange rate to convert the value of the account into U.S. dollars?	☒ Yes ☐ No	
25 If you answered "Yes" to line 24, complete all that apply.		
(a) Foreign currency in which account is maintained	(b) Foreign currency exchange rate used to convert to U.S. dollars	(c) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service
UNITED KINGDOM, POUND	.786000000	

26a Name of financial institution in which account is maintained C HOARE BANK	b Global Intermediary Identification Number (GIIN) (Optional)
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27 Mailing address of financial institution in which account is maintained. Number, street, and room or suite no.**37 FLEET STREET****28** City or town, state or province, country, and ZIP or foreign postal code**LONDON EC4P4DQ UNITED KINGDOM****Part VI Detailed Information for Each "Other Foreign Asset" Included in the Part II Summary** (see instructions)

If you have more than one asset to report in Part VI, attach a separate statement for each additional asset. See instructions.

29 Description of asset FOREIGN PENSION PLAN	30 Identifying number or other designation IPP /
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31 Complete all that apply. See instructions for reporting of multiple acquisition or disposition dates.**a** Date asset acquired during tax year, if applicable**b** Date asset disposed of during tax year, if applicable**c** ☐ Check if asset jointly owned with spouse**d** ☒ Check if no tax item reported in Part III with respect to this asset**32** Maximum value of asset during tax year (check box that applies)**a** ☐ \$0 - \$50,000**b** ☐ \$50,001 - \$100,000**c** ☐ \$100,001 - \$150,000**d** ☐ \$150,001 - \$200,000**e** If more than \$200,000, list value\$ **711,188.****33** Did you use a foreign currency exchange rate to convert the value of the asset into U.S. dollars? ☒ Yes ☐ No**34** If you answered "Yes" to line 33, complete all that apply.

(a) Foreign currency in which asset is denominated

(b) Foreign currency exchange rate used to convert to U.S. dollars

(c) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service

UNITED KINGDOM, POUND**35** If asset reported on line 29 is stock of a foreign entity or an interest in a foreign entity, enter the following information for the asset.**a** Name of foreign entity**b** GIIN (Optional)**c** Type of foreign entity (1) ☐ Partnership (2) ☐ Corporation (3) ☐ Trust (4) ☐ Estate**d** Mailing address of foreign entity. Number, street, and room or suite no.**e** City or town, state or province, country, and ZIP or foreign postal code**36** If asset reported on line 29 is not stock of a foreign entity or an interest in a foreign entity, enter the following information for the asset.**Note:** If this asset has more than one issuer or counterparty, attach a separate statement with the same information for each additional issuer or counterparty. See instructions.**a** Name of issuer or counterparty **CLERICAL MEDICAL PERS PENSION**Check if information is for ☒ Issuer ☐ Counterparty**b** Type of issuer or counterparty(1) ☐ Individual(2) ☐ Partnership(3) ☒ Corporation(4) ☐ Trust(5) ☐ Estate**c** Check if issuer or counterparty is a ☐ U.S. person ☒ Foreign person**d** Mailing address of issuer or counterparty. Number, street, and room or suite no.**CASTLEWOOD TWICKENHAM ROAD****e** City or town, state or province, country, and ZIP or foreign postal code**CASTLEWOOD TWICKENHAM ROAD BS216BD UNITED KINGDOM**

Form 1116

U.S. and Foreign Source Income Summary

NAME

STEPHEN G. HILTON

INCOME TYPE	TOTAL	U.S.	FOREIGN PASSIVE
Compensation	3,101,220.	3,101,220.	
Dividends/Distributions			
Interest	392.	392.	
Capital Gains			
Business/Profession	3,439.	3,439.	
Rent/Royalty	13,060.		13,060.
State/Local Refunds			
Partnership/S Corporation			
Trust/Estate			
Other Income			
Gross Income	3,118,111.	3,105,051.	13,060.
Less:			
Section 911 Exclusion			
Capital Losses			
Capital Gains Tax Adjustment			
Total Income - Form 1116	3,118,111.	3,105,051.	13,060.
Deductions:			
Business/Profession Expenses	145,433.	145,433.	
Rent/Royalty Expenses	13,060.		13,060.
Partnership/S Corporation Losses			
Trust/Estate Losses			
Capital Losses	1,500.	1,500.	
Non-capital Losses			
Individual Retirement Account			
Moving Expenses			
Self-employment Tax Deduction			
Self-employment Health Insurance			
Keogh Contributions			
Alimony			
Forfeited Interest			
Foreign Housing Deduction			
Other Adjustments			
Capital Gains Tax Adjustment			
Total Deductions	159,993.	146,933.	13,060.
Adjusted Gross Income	2,958,118.	2,958,118.	
Less Itemized Deductions:			
Specifically Allocated	5.	5.	
Home Mortgage Interest			
Other Interest			
Ratably Allocated	5,000.	4,979.	21.
Other Deductions			
Total Adjustments to Adjusted Gross Income	5,005.	4,984.	21.
Taxable Income	2,953,113.	2,953,134.	-21.

Form 1116

Allocation of Itemized Deductions

NAME

STEPHEN G. HILTON

	Total Itemized Deductions	Form 1116		
		Specifically U.S.	Specifically Foreign	Ratable
Medical/Dental				
Taxes	5,000.			5,000.
Interest - Not Including Investment Interest				
Investment Interest				
Contributions	5.	5.		
Casualty Losses				
Other Miscellaneous Deductions - Not Including Gambling Losses				
Gambling Losses				
Foreign Adjustment				
Total Itemized Deductions	5,005.	5.		5,000.

STEPHEN G. HILTON

FORM 1040	WAGES RECEIVED AND TAXES WITHHELD				STATEMENT 1	
T S EMPLOYER'S NAME	AMOUNT PAID	FEDERAL TAX WITHHELD	STATE TAX WITHHELD	CITY SDI TAX W/H	FICA TAX	MEDICARE TAX
T FOX NEWS NETWORK LLC	509,615.	122,514.	22,181.		9,932.	10,176.
T NETFLIX, INC.	5,692,825.	2,030,783.	391,333.			
TOTALS	6,202,440.	2,153,297.	413,514.		9,932.	10,176.

FORM 1040	FEDERAL INCOME TAX WITHHELD - OTHER FORMS	STATEMENT 2
T S DESCRIPTION		AMOUNT
FORM 8959, LINE 24		2,787.
TOTAL TO FORM 1040, LINE 25C		2,787.

SCHEDULE 1	STATE AND LOCAL INCOME TAX REFUNDS		STATEMENT 3
	2022	2021	2020
	CALIFORNIA		
GROSS STATE/LOCAL INC TAX REFUNDS	40,164.		
LESS: TAX PAID IN FOLLOWING YEAR			
NET TAX REFUNDS CALIFORNIA	40,164.		
TOTAL NET TAX REFUNDS	40,164.		

SCHEDULE 1		TAXABLE STATE AND LOCAL INCOME TAX REFUNDS		STATEMENT 4
		2020	2021	2022
NET TAX REFUNDS FROM STATE AND LOCAL INCOME TAX REFUNDS STMT.				40,164.
LESS: REFUNDS-NO BENEFIT DUE TO AMT -SALES TAX BENEFIT REDUCTION				
1	NET REFUNDS FOR RECALCULATION		0.	40,164.
2	AMOUNT FROM PRIOR YEAR SCHEDULE A, LINE 5E			5,000.
3	TOTAL OF PRIOR YEAR SCHEDULE A, LINES 5B AND 5C			
4	SUBTRACT LINE 3 FROM LINE 2 IF ZERO OR LESS, STOP HERE NONE OF YOUR REFUND IS TAXABLE	0.	0.	5,000.
5	ENTER THE STATE AND LOCAL INCOME TAXES FROM PRIOR YEAR SCHEDULE A, LINE 5A			400,340.
6	ENTER THE AMOUNT FROM LINE 1			40,164.
7	SUBTRACT LINE 6 FROM LINE 5			360,176.
8	ADD LINE 7 TO LINE 3			360,176.
9	SUBTRACT LINE 8 FROM LINE 2			-355,176.
10	ENTER THE LESSER OF LINE 4, LINE 6 OR LINE 9. IF ZERO OR LESS, STOP HERE. NONE OF YOUR REFUND IS TAXABLE. IF GREATER THAN ZERO, PROCEED TO LINE 11			-355,176.
11	ALLOWABLE PRIOR YEAR ITEMIZED DEDUCTIONS			
12	ENTER YOUR PRIOR YEAR STANDARD DEDUCTION			
13	SUBTRACT LINE 12 FROM LINE 11			
14	ENTER THE SMALLER OF LINE 10 OR LINE 13.			
15	PRIOR YEAR TAXABLE INCOME			
16	AMOUNT TO INCLUDE ON SCHEDULE 1, LINE 1 * IF LINE 15 IS -0- OR MORE, USE AMOUNT FROM LINE 14 * IF LINE 15 IS A NEGATIVE AMOUNT, NET LINES 14 AND 15			
STATE AND LOCAL INCOME TAX REFUNDS PRIOR TO 2020				
TOTAL TO SCHEDULE 1, LINE 1				

STEPHEN G. HILTON

SCHEDULE A	STATE AND LOCAL INCOME TAXES	STATEMENT 5
DESCRIPTION		AMOUNT
FOX NEWS NETWORK LLC		22,181.
NETFLIX, INC.		391,333.
TOTAL TO SCHEDULE A, LINE 5A		413,514.

SCHEDULE D	CAPITAL LOSS CARRYOVER	STATEMENT 6
1. ENTER THE AMOUNT FROM FORM 1040, LINE 15		2,953,113.
2. ENTER THE LOSS FROM SCHEDULE D, LINE 21, AS A POSITIVE AMOUNT		1,500.
3. COMBINE LINES 1 AND 2. IF ZERO OR LESS, ENTER -0-		2,954,613.
4. ENTER THE SMALLER OF LINE 2 OR LINE 3		1,500.
5. ENTER THE LOSS FROM SCHEDULE D, LINE 7, AS A POSITIVE AMOUNT		193,500.
6. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 15		
7. ADD LINES 4 AND 6		1,500.
8. SHORT-TERM CAPITAL LOSS CARRYOVER TO NEXT YEAR. SUBTRACT LINE 7 FROM LINE 5. IF ZERO OR LESS, ENTER -0-		192,000.
9. ENTER THE LOSS FROM SCHEDULE D, LINE 15, AS A POSITIVE AMOUNT		
10. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 7		
11. SUBTRACT LINE 5 FROM LINE 4. IF ZERO OR LESS, ENTER -0-		
12. ADD LINES 10 AND 11		
13. LONG-TERM CAPITAL LOSS CARRYOVER TO NEXT YEAR. SUBTRACT LINE 12 FROM LINE 9. IF ZERO OR LESS, ENTER -0-		

FORM 1116	EXPENSES DIRECTLY ALLOCABLE TO FOREIGN INCOME	STATEMENT 7
DESCRIPTION	COUNTRY	AMOUNT
RESIDENTIAL	UNITED KINGDOM	6,530.
RESIDENTIAL	UNITED KINGDOM	6,530.
TOTAL TO FORM 1116, PART I, LINE 2		13,060.

STEPHEN G. HILTON

FORM 8960

TRADE OR BUSINESS INCOME

STATEMENT 8

CR PRODUCTIONS LLC

141,994.

AMOUNT TO FORM 8960, LINE 4B

141,994.

FORM 8582

OTHER PASSIVE ACTIVITIES - PART V

STATEMENT 9

NAME OF ACTIVITY	CURRENT YEAR		PRIOR YEAR UNALLOWED LOSS	OVERALL GAIN OR LOSS	
	NET INCOME	NET LOSS		GAIN	LOSS
RESIDENTIAL - 67A LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	0.	-26,347.	-48,084.		-74,431.
RESIDENTIAL - 67B LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	0.	-37,439.	-101,580.		-139,019.
TOTALS	0.	-63,786.	-149,664.		-213,450.

FORM 8582

ALLOCATION OF UNALLOWED LOSSES - PART VII

STATEMENT 10

NAME OF ACTIVITY	FORM OR SCHEDULE	LOSS	RATIO	UNALLOWED LOSS
RESIDENTIAL - 67A LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	SCH E	74,431.	.348704615	74,431.
RESIDENTIAL - 67B LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	SCH E	139,019.	.651295385	139,019.
TOTALS		213,450.	1.000000000	213,450.

STEPHEN G. HILTON

FORM 8582

ALLOWED LOSSES - PART VIII

STATEMENT 11

NAME OF ACTIVITY	FORM OR SCHEDULE	LOSS	UNALLOWED LOSS	ALLOWED LOSS
RESIDENTIAL - 67A LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	SCH E	74,431.	74,431.	
RESIDENTIAL - 67B LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	SCH E	139,019.	139,019.	
TOTALS		213,450.	213,450.	

FORM 8582

SUMMARY OF PASSIVE ACTIVITIES

STATEMENT 12

R R E A NAME	FORM OR SCHEDULE	PRIOR YEAR C/O	NET GAIN/LOSS	UNALLOWED LOSS	ALLOWED LOSS
RESIDENTIAL - 67A SCH E LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM		-26,347.	-48,084.	-74,431.	74,431.
RESIDENTIAL - 67B SCH E LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM		-37,439.	-101,580.	-139,019.	139,019.
TOTALS		-63,786.	-149,664.	-213,450.	213,450.
PRIOR YEAR CARRYOVERS ALLOWED DUE TO CURRENT YEAR NET ACTIVITY INCOME					
TOTAL TO FORM 8582, LINE 11					

FORM 8582

ALTERNATIVE MINIMUM TAX
OTHER PASSIVE ACTIVITIES - PART V

STATEMENT 13

NAME OF ACTIVITY	CURRENT YEAR		PRIOR YEAR UNALLOWED LOSS	OVERALL GAIN OR LOSS	
	NET INCOME	NET LOSS		GAIN	LOSS
RESIDENTIAL - 67A LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	0.	-26,347.	-48,084.		-74,431.
RESIDENTIAL - 67B LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	0.	-37,439.	-101,580.		-139,019.
TOTALS	0.	-63,786.	-149,664.		-213,450.

FORM 8582

ALTERNATIVE MINIMUM TAX
ALLOCATION OF UNALLOWED LOSSES - PART VII

STATEMENT 14

NAME OF ACTIVITY	FORM OR SCHEDULE	LOSS	RATIO	UNALLOWED LOSS
RESIDENTIAL - 67A LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	SCH E	74,431.	.348704615	74,431.
RESIDENTIAL - 67B LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	SCH E	139,019.	.651295385	139,019.
TOTALS		213,450.	1.000000000	213,450.

FORM 8582

ALTERNATIVE MINIMUM TAX
ALLOWED LOSSES - PART VIII

STATEMENT 15

NAME OF ACTIVITY	FORM OR SCHEDULE	LOSS	UNALLOWED LOSS	ALLOWED LOSS
RESIDENTIAL - 67A LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	SCH E	74,431.	74,431.	
RESIDENTIAL - 67B LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	SCH E	139,019.	139,019.	
TOTALS		213,450.	213,450.	

STEPHEN G. HILTON



FORM 8582AMT

SUMMARY OF PASSIVE ACTIVITIES - AMT

STATEMENT 16

R R E A NAME	FORM OR SCHEDULE	GAIN/LOSS	PRIOR YEAR C/O	NET GAIN/LOSS	UNALLOWED LOSS	ALLOWED LOSS
RESIDENTIAL - 67ASCH E LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM		-26,347.	-48,084.	-74,431.	74,431.	
RESIDENTIAL - 67BSCH E LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM		-37,439.	-101,580.	-139,019.	139,019.	
TOTALS		-63,786.	-149,664.	-213,450.	213,450.	
PRIOR YEAR CARRYOVERS ALLOWED DUE TO CURRENT YEAR NET ACTIVITY INCOME						
TOTAL TO FORM 8582AMT, LINE 11						